FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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PROCESSED

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NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. **SECTION 4(6), AND/OR** UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY Prefix DATE RECEIVED

Name of Official Annual 164	Determine	name has changed, and ind	Programme A				
•	SEG						
Limited Partner Interests of CS H	Mall Processing						
Filing Under (Check box(es) that apply): 🔲 Rule 504	☐ Rule 505	☐ Rule 50				
Type of Filing: E New Filing	Amendment				and the state of t		
	Α.	BASIC IDENTIFICATION	ON DATA		AUC 2 9 2000		
 Enter the information reques 					MOG C B TOOO		
Name of Issuer (☐ check if the	is is an amendment and	name has changed, and indic	cate change.)				
CS Hudson Clean Energy Partners	s Feeder, L.P.				Neshington, DC		
Address of Executive Officers	(Number and Str	eet, City, State, Zip Code)		Telephone Number (Inc.	luding Area (30de)		
c/o Credit Suisse Private Equity, In	nc., Eleven Madison /	Avenue, New York, New	York 10010	212-325-2000	100		
Address of Principal Business Operatio (if different from Executive Offices)	ns (Number and Str	ect, City, State, Zip Code)		Telephone Number (Inc.	luding Area Code)		
,,							
Brief Description of Business					· ·		
The Fund will invest in an underly	ing fund which will n	nake strategic investment	s in companie	s in the alternative ene	ergy sector.		
Type of Business Organization	<u> – </u>						
☐ corporation	El limited pa	artnership, already formed	0	other (please specify)			
□ business trust	limited pa	artnership, to be formed					
		Month Year					
Actual or Estimated Date of Incorporat	ion or Organization:	06 08	Actual	☐ Estimated			
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: FN							
	CN for Canad	a; FN for other foreign juris	diction)		08058859		

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to the address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

SEC 1972 (5-05)

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

1 OF 9

A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: Promoter □ Director ☐ Beneficial Owner □ Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) Credit Suisse (Cayman) Management Limited Business or Residence Address (Number and Street, City, State, Zip Code) c/o Credit Suisse Private Equity, Inc., Eleven Madison Avenue, New York, New York 10010 Executive Officer Check Box(es) that Apply: ☐ Promoter □ Beneficial Owner ☐ Director ☐ General and/or (of GP) Managing Partner Full Name (Last name first, if individual) Zingalli, Thomas Business or Residence Address (Number and Street, City, State, Zip Code) c/o Credit Suisse Securities (USA) LLC, Eleven Madison Avenue, New York, NY 10010 Check Box(es) that Apply: □ Promoter ☐ Beneficial Owner Executive Officer ☐ Director ☐ General and/or (of GP) Managing Partner Full Name (Last name first, if individual) Dodes, Ivy B Business or Residence Address (Number and Street, City, State, Zip Code) c/o Credit Suisse Securities (USA) LLC, Eleven Madison Avenue, New York, NY 10010 Check Box(es) that Apply: □ Promoter □ Beneficial Owner Executive Officer □ Director ☐ General and/or (of GP) Managing Partner Full Name (Last name first, if individual) Ficarra, John S. Business or Residence Address (Number and Street, City, State, Zip Code) c/o Credit Suisse Securities (USA) LLC, Eleven Madison Avenue, New York, NY 10010 Check Box(es) that Apply: □ Promoter Beneficial Owner Executive Officer □ Director ☐ General and/or (of GP) Managing Partner Full Name (Last name first, if individual) Kelly, Matthew C. Business or Residence Address (Number and Street, City, State, Zip Code) c/o Credit Suisse Securities (USA) LLC, Eleven Madison Avenue, New York, NY 10010 Check Box(es) that Apply: ☐ Promoter □ Beneficial Owner Executive Officer ☐ General and/or ☐ Director (of GP) Managing Partner Full Name (Last name first, if individual) Nadel, Edward S. Business or Residence Address (Number and Street, City, State, Zip Code) c/o Credit Suisse Securities (USA) LLC, Eleven Madison Avenue, New York, NY 10010 Check Box(es) that Apply: ☐ Promoter Beneficial Owner Executive Officer □ Director ☐ General and/or (of GP) Managing Partner Full Name (Last name first, if individual) Petryczenko, Michael E. Business or Residence Address (Number and Street, City, State, Zip Code) c/o Credit Suisse Securities (USA) LLC, Eleven Madison Avenue, New York, NY 10010 Check Box(es) that Apply: □ Promoter □ Beneficial Owner Executive Officer □ Director ☐ General and/or (of GP) Managing Partner Full Name (Last name first, if individual) Arnaboldi, Nicole S. Business or Residence Address (Number and Street, City, State, Zip Code) c/o Credit Suisse Securities (USA) LLC, Eleven Madison Avenue, New York, NY 10010 (Use blank sheet, or copy and use additional copies of this sheet, as necessary)

A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: Executive Officer ☐ Director ☐ Promoter ☐ Beneficial Owner ☐ General and/or (of GP) Managing Partner Full Name (Last name first, if individual) Wilbur, Benjamin J. Business or Residence Address (Number and Street, City, State, Zip Code) c/o Credit Suisse Securities (USA) LLC, Eleven Madison Avenue, New York, NY 10010 Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner Executive Officer □ Director General and/or Managing Partner (of GP) Full Name (Last name first, if individual) Lohsen, Kenneth J. Business or Residence Address (Number and Street, City, State, Zip Code) c/o Credit Suisse Securities (USA) LLC, Eleven Madison Avenue, New York, NY 10010 Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner Executive Officer □ Director ☐ General and/or (of GP) Managing Partner Full Name (Last name first, if individual) Matty, Rhonda G. Business or Residence Address (Number and Street, City, State, Zip Code) c/o Credit Suisse Securities (USA) LLC, Eleven Madison Avenue, New York, NY 10010 Check Box(es) that Apply: ☐ Promoter □ Beneficial Owner Executive Officer □ Director ☐ General and/or (of GP) Managing Partner Full Name (Last name first, if individual) Russo, Lori M. Business or Residence Address (Number and Street, City, State, Zip Code) c/o Credit Suisse Securities (USA) LLC, Eleven Madison Avenue, New York, NY 10010 Check Box(es) that Apply: ☐ Promoter Beneficial Owner □ Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: □ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: □ Promoter □ Beneficial Owner ☐ Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

B. INFORMATION ABOUT OFFERING													
1.	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?							Yes	No				
									Ø				
	Answer also in Appendix, Column 2, if filing under ULOE.									6 #00	050+		
2.	What is the minimum investment that will be accepted from any individual? *Unless the General Partner decides in its sole discretion to accept a lesser amount from a particular investor.								\$ <u>500</u>	<u>*000</u>			
3.	Does the offering permit joint ownership of a single unit?							Yes ☑	No				
4.	Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar renumeration for solication of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.												
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	Suisse Secui			1.6:	g	0.11							
			(Number and	_	y, State, Zip	Code)							
		., .	w York, N	Y 10010									
Name of	Associated	Broker of L	Jealer										
States in	Which Pers	on Listed H	las Solicited	or Intends to	Solicit Pu	chasers							
	(Check "A	All States" o	r check indi	vidual States	;)			.,,				□ All S	tates
	AL	AK	AZ	AR	CA	co	СТ	DE	DC	FL	GA	HI	ID
	IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	МО
	MT	NE			_		_		_	=			
	=		ΝV	NH	NJ	NM	NY	NC	ND	ОН	ОК	OR	PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	wv	WI	WY	PR
Full Name (Last name first, if individual)													
Business	or Residen	ce Address ((Number and	Street, City	, State, Zip	Code)							
Name of	`Associated	Broker or E	Dealer										
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)									States				
	_	_							_				
	AL	AK	AZ	AR	CA	со	СТ	DE	DC	FL	GA	HI	ID
	IL	IN	IA	KS	KY	LA	ME	MD	MA	Ml	MN	MS	МО
	MT	NE	NV	NH	NJ	NM	NY	NC	ND	ОН	ОК	OR	PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	wv	WI	WY	PR
Full Name (Last name first, if individual)													
Business or Residence Address (Number and Street, City, State, Zip Code)													
Name of Associated Broker or Dealer													
Name of Associated bloker of Dealer													
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers								· · · · · · · · · · · · · · · · · · ·					
(Check "All States" or check individual States)								☐ All S	itates				
	AL	AK	AZ	AR	CA	co	CT	DE	DC	FL	GA	HI	ID
	IL	IN	IA	KS	KY	l.A	ME	MD	MA	MI	MN	MS	МО
								OR	PA				
	RI	SC	SD	TN	TX	UT	VT	VA	WA	wv	WI	WY	PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box \square and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Aggregate Amount Types of Security Offering Price Already Sold Equity □ Common □ Preferred Convertible Securities (including warrants) Partnership Interests \$ Unlimited \$ 34,750,000 Other (Specify) Total \$_Unlimited \$ 34,750,000 Answer also in Appendix, Column 3, if filing under ULOE. 2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Number of Dollar Investors Amount of Purchases Accredited investors 60 \$ 34,750,000 Non-accredited Investors Total (for filings under Rule 504 only) Answer also in Appendix, Column 4, if filing under ULOE. 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1. Type of Dollar Type of Offering NOT APPLICABLE Security Amount Sold Rule 505 Regulation A Rule 504 Total a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees Printing and Engraving Costs × \$ _2,000 Legal Fees \$ 75,000 Accounting Fees Engineering Fees Sales Commissions (specify finders' fees separately) Other Expenses (identify) (miscellaneous including travel)..... X \$ 35,000 Total \$ 112,000

	C. OFFERING PRICE, NUMBER OF INVESTO	RS, EXPENSES AND USE OF PR	OCEEDS
	b. Enter the difference between the aggregate offering price g — Question 1 and total expenses furnished in response to Part difference is the "adjusted gross proceeds to the issuer."	C – Question 4.a. This	
			\$ Unlimited
5.	Indicate below the amount of the adjusted gross proceed to the be used for each of the purposes shown. If the amount for any furnish an estimate and check the box to the left of the estimate payments listed must equal the adjusted gross proceeds to the to Part C – Question 4.b above.	purpose is not known, te. The total of the	
		Ó: Dire	ments to fficers, extors, & Payments to ffiliates Others
	Salaries and fees	□\$_	🗆 \$
	Purchase of real estate		🗆 \$
	Purchase, rental or leasing and installation of machinery and equipment		□ \$
	Construction or leasing of plant buildings and facilities		
	Acquisition of other businesses (including the value of securit offering that may be used in exchange for the assets or securit issuer pursuant to a merger)	ies of another	\$
	Repayment of indebtedness		
	Working capital	🗖 \$	
	Other (specify):Investment in accordance with the Fun		nlimited
	Column Totals		
	Total Payments Listed (column totals added)		□ \$ <u>Unlimited</u>
•	D. FEDERAL S	IGNATURE	
the foll-	uer has duly caused this notice to be signed by the undersigned owing signature constitutes an undertaking by the issuer to furn request of its staff, the information furnished by the issuer to an	ish to the U.S. Securities and Exchan	ge Commission, upon
•	Print or Type) Signatu	re .	Date
	IDSON CLEAN ENERGY PARTNERS FEEDER, L.P.	handle	August 25, 2008
	General Partner		
		Signer (Print or Type)	
Edwar	d S. Nadel Vice Pr	esident	

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

